

# DEPARTMENT OF CORRECTIONS POLICIES AND PROCEDURES

Policy No.: DOC 4.5.18	Subject:	ubject: DIRECT MEDICAL ORDERS	
Chapter 4: FACILITY/PROGRAM SERVICES			Page 1 of 2
Section 5: Health Care			Revision Date:
Signature: /s/ by Director Day 9/10/97			Effective Date: Jan. 1, 1998

## I. POLICY:

It is the policy of the Department of Corrections to provide medical treatment according to written or verbal orders signed by a physician, dentist or mid-level practitioner authorized by law to give such orders.

### II. AUTHORITY:

53-1-203, MCA. Powers and Duties of Department of Corrections

National Commission on Correctional Health Care Standards for Health Services in Prison, 2nd printing April, 1994, P-39

#### **III. DEFINITIONS:**

None.

#### IV. PROCEDURES:

- A. Only a licensed health care professional may receive written or verbal orders to initiate treatment.
- B. Any order for treatment will be written on the order sheet as a written or verbal order, signed, dated, and timed.
- C. The order will be reviewed prior to scheduling of services.

Policy No.: I	OOC 4.5.18	Chapter: Facility/Program Services	Page 2 of 2		
Subject: DIRECT MEDICAL ORDERS					

- D. Any questionable orders will be brought to the attention of the prescribing practitioner for review, verification, and revision if necessary.
- E. Medical services will be scheduled according to the written order and will be initialed, timed, and dated to signify scheduling is complete.
- F. If on-site medication and treatment are required, disposition of such will be documented in the health care record, (i.e. patient given medication to take in cell, or medication shall be given during regularly scheduled medication lines).
- G. Orders for treatments and diagnostic procedures will be carried out by qualified personnel according to state professional practice statutes.
- H. Verbal orders will be reviewed and signed by the prescribing practitioner within 72 hours. If the prescribing practitioner is not available within 72 hours, the order may be reviewed and signed by another practitioner.

#### V. CLOSING:

Questions concerning this policy shall be directed to the Department Health Services Manager.